FINANCIAL STATEMENTS AND REPORT OF
INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS
LINCOLN COUNTY HOSPITAL
MARCH 31, 2011 AND 2010

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### LINCOLN COUNTY HOSPITAL MANAGEMENT'S DISCUSSION AND ANALYSIS Years ended March 31, 2011 and 2010

Our discussion and analysis of the financial performance of Lincoln County Hospital provides a narrative overview of the Hospital's financial activities for the years ended March 31, 2011 and 2010. Please read it in conjunction with the accompanying basic financial statements.

#### Financial highlights

The Hospital reported operating losses of \$611,588 in 2011, \$385,609 in 2010, and \$308,076 in 2009. After consideration of tax appropriations and other nonoperating revenues and expenses, the Hospital's net assets decreased by \$372,794 or 14 percent in 2011 and increased by \$22,647 or .8 percent in 2010.

#### Using these financial statements

The Hospital's financial statements consist of three statements - a Balance Sheet; a Statement of Revenues, Expenses, and Changes in Net Assets; and a Statement of Cash Flows. These financial statements and related notes provide information about the activities of the Hospital, and resources held by or for the benefit of the Hospital.

One of the most important questions asked about the Hospital's finances is, "Is the Hospital as a whole better or worse off as a result of the year's activities?" The Balance Sheet and the Statement of Revenues, Expenses, and Changes in Net Assets report information about the Hospital's resources and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets and all liabilities using the accrual basis of accounting. Revenues and expenses are taken into account regardless of when cash is received or paid.

These two statements report the Hospital's net assets and changes in them. The Hospital's net assets - the difference between assets and liabilities may be thought of as one way to measure the financial health, or financial position. Over time, increases or decreases in the Hospital's net assets are one indicator of whether its financial health is improving or deteriorating. Consideration must also be given to other nonfinancial indicators, such as changes in the Hospital's patient base and measures of the quality of service it provides to the community, as well as local economic factors to assess the overall health of the Hospital.

The final required statement is the Statement of Cash Flows. The statement reports cash receipts, cash payments, and net changes in cash resulting from operating, investing, and financing activities. It provides answers to such questions as "Where did cash come from?", "What was cash used for?", and "What was the change in cash balance during the reporting period?"

#### LINCOLN COUNTY HOSPITAL

#### MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED

Years ended March 31, 2011 and 2010

#### Assets, liabilities, and net assets

Table 1 below summarizes the Hospital's assets, liabilities, and net assets for the latest three calendar years.

Table 1: Assets, Liabilities, and Net Assets

	2011	2010	2009
Assets			
Current assets	\$1,831,796	\$1,760,006	\$1,467,039
Capital assets, net	6,924,420	3,450,115	540,556
Other noncurrent assets	1,707,525	4,783,334	7,489,184
Total assets	10,463,741	9,993,455	9,496,779
Current liabilities	1,293,052	930,927	454,904
Noncurrent liabilities	6,796,950	6,315,995	6,317,989
Total liabilities	8,090,002	7,246,922	6,772,893
Total net assets	\$2,373,739	\$2,746,533	\$2,723,886

We try to maintain a consistent liquidity position in our balance sheet with our ratio of current assets to current liabilities equaling 1.41 in 2011, 1.90 in 2010, and 3.20 in 2009. This ratio has declined from year to year due to the change in the amount that is due to or from third-parties, the amount of cash carried on the balance sheet, which is affected by the payment position with Medicare, timing of withdrawals from board funds, and the increase in current portion of long-term obligations in 2011. The Hospital recorded a liability from third-party payors of \$271,545, in 2011, and a receivable of \$220,947 in 2010, and of \$341,163 in 2009. The change in this balance means that the Hospital's interim payments received were higher or lower than actual reimbursement, which affects the year-end cost report settlement and cash. The month-to-month cash flow of the Hospital affects the amount of funds requested from Board funds to cover operating losses.

The Lincoln County, Kansas Public Building Commission issued revenue bonds in the amount of \$6,300,000 on behalf of the Hospital during 2009. These funds were used to renovate the existing Hospital building. There was \$843,696 of costs related to this project in construction in progress at March 31, 2011, as compared to \$3,107,411 in 2010. The renovation was completed in April 2011. The Hospital also entered into a lease of a CT Scan and a PACS system in 2011. Both of these leases met the criteria for capitalization which resulted in a \$758,690 increase in capital assets and long-term obligations.

The Hospital's capital acquisitions were \$3,786,132, \$2,991,498, and \$183,783 during 2011, 2010, and 2009. The remaining change in capital assets, net, results from the normal annual depreciation provisions of \$311,828, \$81,938, and \$144,055 during 2011, 2010, and 2009. The increase in depreciation expense in 2011 is due to phase I and II of the Hospital renovation being placed into service during the year.

Other noncurrent assets consist of board funds that are available to fund the continuing operation of the Hospital, a debt service reserve fund, funds set aside for future replacement of capital assets, and funds set aside for payment

#### LINCOLN COUNTY HOSPITAL

#### MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED

Years ended March 31, 2011 and 2010

of future health claims expense. These balances will fluctuate as tax appropriations and contributions are received and funds are dispersed to the Hospital's operating cash account. These funds decreased by \$29,148 in 2011 and increased by \$115,083 in 2010 as compared with the previous year. These funds are important in operating the Hospital on a day-to-day basis and to manage through periods of lower cash flows. Also included in other noncurrent assets are funds held by the Lincoln County Public Building Commission which are being used to fund a major renovation of the Hospital which began in fall of 2009.

#### Operating results and changes in net assets

In 2011, the Hospital's net assets decreased by \$372,794 or 14 percent. This change is made up of different components as displayed below in Table 2.

Table 2: Operating Results and Changes in Net Assets

	2011	2010	2009
Operating revenues Net patient service revenue Other operating revenue	\$ 5,148,075 101,365	\$4,694,642 55,657	\$4,589,336 40,992
Total operating revenues	5,249,440	4,750,299	4,630,328
Operating expenses Salaries and benefits Supplies and other Depreciation and amortization	3,409,630 2,139,570 311,828	3,107,663 1,946,307 81,938	3,033,429 1,760,920 144,055
Total operating expenses	5,861,028	5,135,908	4,938,404
Operating loss	(611,588)	(385,609)	(308,076)
Nonoperating revenues net of expenses Capital grants and contributions	214,630	399,376 8,880	398,550
Increase (decrease) in net assets	\$ (372,794)	\$ 22,647	\$ 90,474

The first component of the overall change in the Hospital's net assets is its operating loss - generally the difference between net patient service revenue and other operating revenues and the expenses incurred to generate those revenues. In 2011, the Hospital's operating loss increased by \$225,979 in comparison to 2010, while in 2010 the operating loss increased by \$77,533 in comparison to 2009. The Hospital's net patient service revenue in 2011 increased by 9.7 percent and in 2010 increased by 2.3 percent over the previous year. The change in net patient service revenue is affected by changes in charges to patients, payment rates by third-party payors, patient volumes, the type of services provided, bad debts, and, to a greater extent, the change in Medicare reimbursable costs. The increase in net revenues was accompanied with a 14 percent increase in operating expenses during 2011 as discussed below. Combined, these changes resulted in an increase in the operating loss of \$225,979 over 2011.

### LINCOLN COUNTY HOSPITAL MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED

Years ended March 31, 2011 and 2010

In 2011 and 2010, the Hospital received 81 percent of its net patient revenue from the Medicare program with these revenues determined based on the Hospital's status as a critical access hospital provider. This designation results in the Hospital services to Medicare beneficiaries being reimbursed primarily based upon allowable costs and has helped stabilize the Hospital's net patient service revenues. This high concentration of Medicare revenues, however, makes it challenging for the Hospital to generate operating profits, as revenues from non-Medicare payers are not sufficient to cover the costs that are not reimbursed by the Medicare program.

Employee salaries, wages, and benefits increased by \$301,967 (10 percent) in 2011 and increased by \$74,234 (2.4 percent) in 2010 as compared with the previous year. Salaries, wages, and employee benefits represent 65 percent, 63 percent, and 66 percent of total operating revenues in 2011, 2010, and 2009. Total Hospital staffing increased by 2.3 full-time equivalent employees in 2011 as compared to 2010, with the only other increases being caused by inflationary pressures and services covered by third-party contract service providers when employees cannot be retained for specific skilled positions. Employee benefits as a percentage of salary and wage expense was 23.5 percent in 2011, 23.1 percent in 2010, and 21.6 percent in 2009.

Supplies and other expenses increased by \$193,263 in 2011 and by \$185,387 in 2010, and decreased by \$236,520 in 2009. Items affecting the 2011 to 2010 comparison include increased costs of pharmacy supplies sold and rental costs of \$89,000, an increase in administrative costs of \$72,000, an increase in contract nursing expense of \$29,000, an increase in minor equipment of \$28,000, and an increase in physician recruitment expense of \$26,000. These increases were partially offset by a \$154,000 decrease in contract ER and clinic physician service expense. Items affecting the 2010 to 2009 comparison included increased costs for ER physician coverage and clinic physician coverage, cost of pharmacy supplies sold, and costs of laboratory purchased services.

Nonoperating revenues (expenses) include an annual tax appropriation from Lincoln County, noncapital grants and contributions, interest expense, and investment income earned on investments. Interest expense increased by \$204,000 in 2011 which was due to phase I and phase II of the renovation project being placed into service in 2011. The Hospital is highly dependent on these nonoperating revenues to offset operating losses and to maintain the financial health necessary to insure that the Hospital continues to provide high quality healthcare services to our patients.

This financial report is designed to provide a general overview of the Hospital's finances and to discuss the significant changes in our financial statements. If you have any questions about the report or need additional financial information, contact the Administration Office at Lincoln County Hospital, 624 N. 2nd, Lincoln, Kansas 67455.



Certified Public Accountants and Management Consultants

Brian J. Florea, CPA Derek H. Hart, CPA John R. Helms, CPA Darrell D. Loyd, CPA Eric L. Otting, CPA

Jere Noe, CPA John E. Wendling, CPA Gary D. Knoll, CPA Adam C. Crouch, CPA Heather R. Eichem, CPA

#### REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Board of Trustees Lincoln County Hospital

We have audited the accompanying financial statements of the business-type activity and discretely presented component unit of Lincoln County Hospital, a component unit of Lincoln County, Kansas, as of and for the years ended March 31, 2011 and 2010, which collectively comprise the Hospital's basic financial statements as listed in the table of contents. These financial statements are the responsibility of the Hospital's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the Kansas Municipal Audit Guide. These standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Hospital's internal control over financial reporting. Accordingly, we express no such opinion. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to previously present fairly, in all material respects, the respective financial position of the business-type activity and discretely presented component unit of Lincoln County Hospital as of March 31, 2011 and 2010, and their respective results of operations, changes in their net assets, and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Management's discussion and analysis on pages 1 through 4 is not a required part of the basic financial statements but is supplementary information required by the Governmental Accounting Standards Board. We have applied certain limited procedures, which consisted principally of inquiries of management regarding methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

Wendling Noe Molson & Johnson 22C Topeka, Kansas July 29, 2011



# LINCOLN COUNTY HOSPITAL BALANCE SHEETS March 31,

#### ASSETS

	2011		2010			
		Component	17.00	Component		
	<u> Hospital</u>	<u>unit</u>	<u> Hospital</u>	<u>unit</u>		
CURRENT ASSETS						
Cash	\$ 489,623	\$ 55,787	\$ 347,874	\$ 60,722		
Investments	,,	5,625	4 02//0/2	5,542		
Assets limited as to use	309,122	,	480,447	-,		
Accounts receivable, net of allowance for uncollectible accounts of \$106,476 in 2011			·			
and \$136,815 in 2010	878,293		544,446			
Other receivables	1,131		6,505			
Inventories	109,275		119,868			
Prepaid expenses and other	44,352		39,919			
Estimated third-party payor						
settlements			220,947			
Total current assets	1,831,796	61,412	1,760,006	66,264		
ASSETS LIMITED AS TO USE By Board of Trustees						
For operations	1,359,186		1,453,001			
For debt service reserve	91,917		54 <b>,</b> 947			
For capital assets	30,639		18,315			
For health claims	15,373					
By Public Building Commission	316,243		3,509,299			
Less amounts required to meet	1,813,358	-	5,035,562	-		
current obligations	309,122		480,447	-		
	1,504,236	-	4,555,115	_		
CAPITAL ASSETS, net	6,924,420		3,450,115			
OTHER ASSETS Deferred financing costs, less accumulated amortization of \$27,294 in 2011 and \$15,164						
in 2010	178,589		190,719			
Other receivables	24,700	-	37,500			
	203,289	-	228,219			
Total assets	\$10,463,741	\$ 61,412	\$ 9,993,455	\$ 66,264		

#### LIABILITIES AND NET ASSETS

	2011		2010			
		Component		Component		
	<u> Hospital</u>	<u>unit</u>	<u> Hospital</u>	<u>unit</u>		
CURRENT LIABILITIES						
Current maturities of						
long-term obligations	\$ 260,006	\$ -	\$ 1,994	\$ -		
Accounts payable	67,583	•	114,829	•		
Construction costs payable	264,362		453,986			
Salaries payable	179,389		149,278			
Payroll taxes payable	75,766		60,153			
Vacation benefits payable	93,598		92,008			
Other accrued expenses	51,416		32,218			
Interest payable	29,387		26,461			
Estimated third-party payor						
settlements	271,545					
Total current						
liabilities	1,293,052	### A TOTAL A	930,927	_		
TOMO HEDRA ODI TONETONO I						
LONG-TERM OBLIGATIONS, less	C 70C 0F0		6 215 005			
current maturities	6,796,950		6,315,995	-		
NET ASSETS						
Invested in capital assets			•			
net of related debt	139,196		653,734			
Restricted	137,170		000,704			
For debt service	58,385					
For specific operating activities		49,973		54,825		
Unrestricted	2,176,158	11,439	2,092,799	11,439		
Total net assets	2,373,739	61,412	2,746,533	66,264		
Total liabilities						
and net assets	\$10,463,741	\$ 61,412	\$ 9,993,455	\$ 66,264		

## LINCOLN COUNTY HOSPITAL STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS Year ended March 31,

	20	011	2010			
		Component		Component		
	Hospital	unit	Hospital	unit		
	<u> </u>					
Operating revenues						
Net patient service revenue	\$ 5,148,075	\$ -	\$ 4,694,642	\$ -		
Other	101,365	50,382	55,657	69,742		
			33,037			
Total operating						
revenues	5,249,440	50,382	4,750,299	69,742		
10 V GII (C D		30/302	1,730,233			
Operating expenses						
Salaries and wages	2,761,935		2,525,460			
Employee benefits	647,695					
Supplies and other	,	EE 0.00	582,203	15 006		
Depreciation	2,139,570	55,868	1,946,307	15,086		
Depreciation	311,828		81,938			
Mahal avanativa						
Total operating	F 0C1 000	FF 0.C0	F 12F 000	15 000		
expenses	5,861,028	55,868	5,135,908	15,086		
Operating (logg) income	((11 500)	(5.406)	(205 600)	E4 656		
Operating (loss) income	(611,588)	(5,486)	(385,609)	54,656		
NTon concept in a second of the second of th						
Nonoperating revenues (expenses)						
Tax appropriations	369,685		363,293			
Investment income	29,165	634	38,045	169		
Interest expense	(206,231)		(1,972)			
Noncapital grants and						
contributions	22,011		10			
Total nonoperating						
revenues (expenses)	214,630	634	399,376	169		
Excess of revenues over						
expenses (expenses over						
revenues) before capital						
grants and contributions	(396,958)	(4,852)	13,767	54,825		
Capital grants and			·	•		
contributions	24,164		8,880			
Increase (decrease) in net						
assets	(372,794)	(4,852)	22,647	54,825		
Net assets beginning of year	2,746,533	66,264	2,723,886	11,439		
Net assets end of year	\$ 2,373,739	\$ 61,412	\$ 2,746,533	\$ 66,264		
				7 00,201		

### LINCOLN COUNTY HOSPITAL STATEMENTS OF CASH FLOWS Year ended March 31,

	2011		2010			
	Hospital	Component <u>unit</u>	<u> Hospital</u>	Component unit		
Cash flows from operating activities Receipts from and on behalf of						
patients	\$ 5,306,720	\$ -	\$ 4,980,665	\$ -		
Payments to or on behalf of employees	(3,343,118)	/== o.co\	(3,115,812)	(		
Payments for supplies and services Other receipts and payments	(2,180,656) 114,165	(55,868) 50,382	(1,879,297) 63,485	(15,086) 69,742		
other receipts and payments		30,302		09,742		
Net cash provided (used) by operating activities	(102,889)	(5,486)	49,041	54,656		
Cash flows from noncapital financing activities						
Tax appropriations	369,685		363,293			
Noncapital grants and contributions	22,011		10			
Net cash provided by noncapital financing						
activities	391,696	_	363,303	_		
activities						
Cash flows from capital and related financing activities						
Purchase of capital assets	(3,184,851)		(2,213,136)			
Principal paid on long-term obligations	(17 (02)		(21 010)			
Interest paid on long-term	(17,602)		(31,919)			
obligations	(320,419)		(319,499)			
Capital grants and contributions	24,164		8,880			
			· · · · · · · · · · · · · · · · · · ·			
Net cash used by capital						
and related financing	/					
activities	(3,498,708)		(2,555,674)	-		
Cash flows from investing activities Changes in						
Internally designated funds	29,148		(115,083)			
Investments		(83)		(117)		
Assets held by Public Building						
Commission	3,193,056	62.4	2,361,316			
Investment income received	129,446	634	46,014	169		
Net cash provided by						
investing activities	3,351,650	551	2,292,247	52		
<u> </u>						
Net increase (decrease) in cash and						
cash equivalents	141,749	(4,935)	148,917	54,708		
Cash and cash equivalents at beginning	247 074	60 500	100 055	c 0		
of year	347,874	60,722	198,957	6,014		
Cash and cash equivalents at end						
of year	\$ 489,623	\$ 55,787	\$ 347,874	\$ 60,722		
<b>∡</b> = - · · ·						

# LINCOLN COUNTY HOSPITAL STATEMENTS OF CASH FLOWS - CONTINUED Year ended March 31,

		20	11			20	10	
	Ī	<u>Hospital</u>	Co —	mponent unit	Ī	Hospital	Co	omponent unit
Reconciliation of operating (loss) income to net cash provided (used) by operating activities Operating (loss) income Adjustments to reconcile	\$	(611,588)	\$	(5,486)	\$	(385,609)	\$	54,656
operating (loss) income to net cash (used) provided by operating activities								
Depreciation		311,828				81,938		
Provision for bad debts		190,933				234,908		
Changes in								
Accounts receivable		(524,780)				(69,101)		
Estimated third-party payor						, ,		
settlements		492,492				120,216		
Other assets		12,800				(6,500)		
Inventories		10,593				11,940		
Prepaid expenses and other		(4,433)				9,287		
Accounts payable and accrued		, , ,				- /		
expenses		19,266	***************************************			51,962		
Net cash (used) provided								
by operating activities	\$	(102,889)	\$	(5,486)	\$	49,041	\$	54,656
Supplemental schedule of noncash investing and financing activities								
Capital lease obligations incurred	\$	758,690	\$	_	\$	_	\$	

### NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### 1. Reporting entity

Lincoln County Hospital (the Hospital) is owned by Lincoln County, Kansas, and is operated by the Board of Trustees of the Hospital, a seven-member governing board appointed by the governing body of the County. The Hospital, which was organized in 1952, is a not-for-profit general hospital located in Lincoln, Kansas. The Hospital can sue and be sued, and can buy, sell, or lease real property. Bond issuances must be approved by the County. The Hospital is a component unit of the County.

#### 2. Component unit

The financial statements include the discrete presentation of financial data of Lincoln County Hospital and Health Care Foundation (The Foundation). The component unit is reported separately to emphasize that it is legally separate from the Hospital.

The Foundation, which is a not-for-profit corporation, was established in 2005 for the purpose of providing financial assistance to the Hospital. The association is administered by a self-perpetuating Board of Directors. Two of the five members of the Foundation's Board are also members of the Hospital's Board of Trustees.

#### 3. Use of estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from these estimates.

#### 4. Basis of accounting

The Hospital uses enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus. Pursuant to Governmental Accounting Standards Board (GASB) Statement No. 20, "Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities that Use Proprietary Accounting," the Hospital has implemented all GASB pronouncements, and Financial Accounting Standards Board (FASB) Statements and Interpretations, Accounting Principles Board Opinions, and Accounting Research Bulletins issued before November 30, 1989, except those that conflict with GASB pronouncements, and has elected not to apply FASB Statements and Interpretations issued after November 30, 1989.

#### 5. Cash and cash equivalents

Cash and cash equivalents include all cash and highly liquid debt instruments with maturities of three months or less excluding any such amounts included in assets limited as to use.

### NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### 6. Allowance for doubtful accounts

The Hospital provides for accounts receivable that could become uncollectible in the future by establishing an allowance to reduce the carrying value of such receivables to their estimated net realizable value. The Hospital estimates this allowance based on the aging of its accounts receivable and its historical collection experience for each type of payor.

#### 7. Inventories

Inventories are stated at cost as determined using the first-in, first-out method.

#### 8. Assets limited as to use

Assets limited as to use include assets set aside by the Board of Trustees for ongoing hospital operations, for the replacement of capital assets, for debt service reserve, and for payment of partially self-insured health claims, over which the Board retains control; and assets whose use is limited under a bond indenture agreement that are held by the Lincoln County Public Building Commission.

#### 9. Capital assets

Capital assets, including assets recorded as capital leases, are stated at cost. Depreciation and amortization of capital assets are provided on the straight-line method over the estimated useful lives of the assets which are substantially in conformity with the guidelines established by the American Hospital Association.

The costs of maintenance and repairs are charged to operating expenses as incurred. The costs of significant additions, renewals, and betterments to depreciable properties are capitalized and depreciated over the remaining or extended useful lives of the item or the properties.

#### 10. Vacation benefits payable

Employees of the Hospital are entitled to paid vacation depending on length of service and whether they are full or part time. Upon resignation, termination, or retirement from service with the Hospital, employees are entitled to payment for all accrued vacation, up to an allowable maximum. The Hospital accrues vacation benefits as earned.

#### 11. Net assets

Net assets of the Hospital are classified in three components. "Net assets invested in capital assets net of related debt" consist of capital assets net of accumulated depreciation and reduced by the balances of any outstanding borrowings used to finance the purchase of assets. "Restricted net assets" are noncapital net assets that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Hospital, including amounts deposited with the Lincoln County, Kansas, Public Building Commission as required under the Pledge of Revenues and Operation Agreement signed in connection with the issuance of bonds by the Lincoln County, Kansas, Public Building Commission. "Unrestricted net assets" are remaining net assets that do not meet the definitions of the other two components of net assets.

### NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### 12. Operating revenues and expenses

The Hospital's statement of revenues, expenses, and changes in net assets distinguishes between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services, which is the Hospital's principal activity. Nonexchange revenues, including noncapital grants and contributions and tax appropriations, are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

#### 13. Net patient service revenue

Net patient service revenue is reported at established charges with deductions for discounts, contractual adjustments, and provision for bad debts, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

#### 14. Cost of borrowing

Interest costs including amortization of deferred financing costs and bond premiums incurred on borrowed funds during the period of construction of capital assets are capitalized as a component of the cost of acquiring those assets.

Deferred financing costs incurred in connection with the issuance of long-term debt are amortized over the term of the related debt using the interest method.

#### 15. Grants and contributions

From time to time, the Hospital receives grants and contributions from individuals and private organizations. Revenues from grants and contributions, including contributions of capital assets, are recognized when all eligibility requirements, including time requirements, are met. Grants and contributions may be restricted for specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as nonoperating revenues. Amounts restricted to capital acquisitions are reported after nonoperating revenues and expenses.

#### 16. Restricted resources

When the Hospital has both restricted and unrestricted resources available to finance a particular program, it is the Hospital's policy to use restricted resources before unrestricted resources.

#### 17. Income taxes

The Hospital is exempt from federal income taxes pursuant to Section 115 of the Internal Revenue Code.

#### NOTE B - NET PATTENT SERVICE REVENUE

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established charge rates. The amounts reported on the balance sheet as estimated third-party payor settlements consist of management's best estimate of the differences between the contractual amounts for providing covered services and the interim payments received for those services. A summary of the payment arrangements with major third-party payors follows:

Medicare - Services rendered to Medicare program beneficiaries are paid under the provisions applicable to critical access hospitals. Payments to the Hospital under the critical access provisions for inpatient, outpatient, and swing-bed patient services are determined on the basis of allowable costs. The Hospital is paid for cost reimbursable and other services at tentative rates with final settlement determined after submission of annual cost reports by the Hospital and audits or reviews thereof by the Medicare fiscal intermediary. The Hospital's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization. The Hospital's Medicare cost reports have been audited or reviewed by the Medicare fiscal intermediary through March 31, 2010.

Medicaid - Services rendered to Medicaid program beneficiaries, other than those covered by managed care plans, are paid under provisions applicable to critical access hospitals. Payments to the Hospital under the critical access hospital provisions are based on cost reimbursement methodologies used by the Medicare program. Final settlement with the Medicaid program is based on a cost report submitted and settled upon by the Medicare program. Medicaid has final settled these cost reports through March 31, 2008. For the period January 1, 2010 through June 30, 2010, payments from the Medicaid program were reduced by 10 percent as the State of Kansas worked to balance its budget.

Blue Cross and Blue Shield - All services rendered to patients who are insured by Blue Cross and Blue Shield are paid on the basis of prospectively determined rates per discharge or discounts from established charges.

A summary of gross and net patient service revenue follows:

	<u>2011</u>	2010
Gross patient service revenue Third-party contractual adjustments	\$ 6,304,819 (940,571)	\$ 6,342,157 (1,378,777)
Charity care	(14,021)	(23,198)
Other discounts and allowances Provision for bad debts	(11,219) (190,933)	(10,632) (234,908)
Net patient service revenue	\$ 5,148,075	\$ 4,694,642

#### NOTE B - NET PATIENT SERVICE REVENUE - Continued

Revenue from the Medicare program accounted for approximately 81 percent of the Hospital's net patient service revenue during 2011 and 2010, respectively. Laws and regulations governing the Medicare program are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates could change by a material amount in the near term.

#### NOTE C - DEPOSITS WITH FINANCIAL INSTITUTIONS

Kansas statutes authorize the Hospital with certain restrictions, to deposit or invest in open accounts, time deposits, certificates of deposit, repurchase agreements, U.S. Treasury bills and notes, and the State Treasurer's investment pool. Kansas statutes also require that collateral be pledged for bank deposits with a fair value equal to total deposits in excess of F.D.I.C. coverage at any given time and the securities pledged be deposited with a Kansas state or national bank or trust company, the Federal Reserve Bank, or the Federal Home Loan Bank.

At March 31, 2011, the carrying amount of the Hospital's bank deposits, including certificates of deposit, was \$1,986,599 and the bank balances were \$1,962,202. Of the bank balances, \$350,000 was covered by federal depository insurance and \$1,612,202 was uninsured and collateralized with securities held by a third-party bank, but not registered in the Hospital's name.

#### NOTE D - ASSETS LIMITED AS TO USE

The composition of assets limited as to use is as follows:

	2011	2010
Board of Trustee funds Cash Certificates of deposit	\$ 1,397,115 100,000	\$ 716,263 810,000
	\$ 1,497,115	\$ 1,526,263
Under bond agreements Cash Certificates of deposit	\$ 316,243  \$ 316,243	\$ 19,901 3,489,398 \$ 3,509,299
Assets limited as to use by bond agreements accounts:		

	2011	2010
Project fund Principal and interest	\$ 257,858 58,385	\$ 3,489,618 19,681
	\$ 316,243	\$ 3,509,299

## NOTES TO FINANCIAL STATEMENTS - CONTINUED March 31, 2011 and 2010

#### NOTE E - CAPITAL ASSETS

	Balance March 31, 2010	Transfers and additions	Retirements	Balance March 31, 2011
Land Land improvements Buildings Fixed equipment Movable equipment	\$ 15,926 38,879 965,974 590,943 1,487,188	\$ 3,799 127,453 912,647 4,098,290 907,658	\$ - 33,157 10,627 156,852	\$ 19,725 166,332 1,845,464 4,678,606 2,237,994
	3,098,910	6,049,847	200,636	8,948,121
Less accumulated depreciation and amortization				
Land improvements	9,442	8,635		18,077
Buildings	823,910	60,617	33,157	851,370
Fixed equipment	551,270	182,768	10,627	723,411
Movable equipment	1,371,584	59,807	156,852	1,274,539
	2,756,206	311,827	200,636	2,867,397
Construction in progress	3,107,411	(2,263,715)		843,696
Capital assets, net	\$ 3,450,115	\$ 3,474,305	\$ -	\$ 6,924,420
	Balance March 31, 2009	Transfers and additions	Retirements	Balance March 31, 2010
Land	March 31, 2009	and additions		March 31, 2010
Land	March 31, 2009 \$ 11,000	and additions \$ 4,926	Retirements	March 31, 2010 \$ 15,926
Land improvements	March 31, 2009 \$ 11,000 10,897	and additions \$ 4,926 27,982		March 31, 2010 \$ 15,926 38,879
Land improvements Buildings	March 31, 2009 \$ 11,000 10,897 874,184	and additions \$ 4,926		March 31, 2010 \$ 15,926 38,879 965,974
Land improvements	March 31, 2009 \$ 11,000 10,897	and additions \$ 4,926 27,982		March 31, 2010 \$ 15,926 38,879
Land improvements Buildings Fixed equipment	March 31, 2009 \$ 11,000 10,897 874,184 590,943	and additions \$ 4,926 27,982 91,790		March 31, 2010 \$ 15,926 38,879 965,974 590,943
Land improvements Buildings Fixed equipment	\$ 11,000 10,897 874,184 590,943 1,458,808	and additions \$ 4,926 27,982 91,790 28,380		\$ 15,926 38,879 965,974 590,943 1,487,188
Land improvements Buildings Fixed equipment Movable equipment  Less accumulated depreciation and	March 31, 2009 \$ 11,000 10,897 874,184 590,943 1,458,808 2,945,832	and additions  \$ 4,926 27,982 91,790 28,380 153,078		March 31, 2010 \$ 15,926 38,879 965,974 590,943 1,487,188 3,098,910
Land improvements Buildings Fixed equipment Movable equipment  Less accumulated depreciation and amortization	\$ 11,000 10,897 874,184 590,943 1,458,808	and additions \$ 4,926 27,982 91,790 28,380		\$ 15,926 38,879 965,974 590,943 1,487,188
Land improvements Buildings Fixed equipment Movable equipment  Less accumulated depreciation and amortization Land improvements Buildings Fixed equipment	March 31, 2009 \$ 11,000 10,897 874,184 590,943 1,458,808 2,945,832	and additions  \$ 4,926 27,982 91,790 28,380 153,078		March 31, 2010 \$ 15,926 38,879 965,974 590,943 1,487,188 3,098,910
Land improvements Buildings Fixed equipment Movable equipment  Less accumulated depreciation and amortization Land improvements Buildings	March 31, 2009 \$ 11,000 10,897 874,184 590,943 1,458,808 2,945,832	and additions  \$ 4,926 27,982 91,790 28,380 153,078		March 31, 2010 \$ 15,926 38,879 965,974 590,943 1,487,188 3,098,910
Land improvements Buildings Fixed equipment Movable equipment  Less accumulated depreciation and amortization Land improvements Buildings Fixed equipment	March 31, 2009 \$ 11,000 10,897 874,184 590,943 1,458,808 2,945,832 8,724 808,241 545,807	and additions  \$ 4,926 27,982 91,790 28,380 153,078		March 31, 2010 \$ 15,926 38,879 965,974 590,943 1,487,188 3,098,910 9,442 823,910 551,270
Land improvements Buildings Fixed equipment Movable equipment  Less accumulated depreciation and amortization Land improvements Buildings Fixed equipment	March 31, 2009 \$ 11,000 10,897 874,184 590,943 1,458,808 2,945,832 8,724 808,241 545,807 1,311,495	and additions  \$ 4,926 27,982 91,790 28,380  153,078  718 15,669 5,463 60,089		March 31, 2010 \$ 15,926 38,879 965,974 590,943 1,487,188 3,098,910 9,442 823,910 551,270 1,371,584

#### NOTE F - LONG-TERM OBLIGATIONS

Long-term obligations are summarized as follows:

		2011	2010
Capital lease obligation with the I County, Kansas Public Building Co interest rate of 4.375% to 5.50%; on December 15, 2008, in the orig amount of \$6,300,000; due seriall through March 1, 2035	\$6,300,000	\$6,300,000	
_		Ç 0,300,000	
Capital lease obligation; imputed i rate of 13.22%; paid off in 2011	nterest		1,994
Capital lease obligation; imputed i rate of 5.50%; payable in monthly installments of \$10,850 through M collateralized by leased equipmen amortized cost of \$659,590 at Mar	arch 2017; t with an	668,880	
Capital lease obligation; interest of 4.625%; payable in monthly ins of \$2,053 through June 2014; coll by leased equipment with an amort	tallments ateralized ized	74.000	
cost of \$659,590 at March 31, 201	1	74,202	
Unamortized premium on bonds		7,043,082 13,874	6,301,994 15,995
Less current maturities	7,056,956 260,006	6,317,989 1,994	
		\$6,796,950	\$6,315,995
The following is a summary of changes	in long-ter	m obligations:	
	Capital lease <u>obligations</u>	Capital lease <u>with PBC</u>	Total long-term <u>obligations</u>
Outstanding at April 1, 2009 Principal payments	\$ 33,913 (31,919)	\$6,300,000	\$6,333,913 (31,919)
Outstanding at March 31, 2010 Obligations incurred Principal payments	1,994 758,690 (17,602)	6,300,000	6,301,994 758,690 (17,602)
Outstanding at March 31, 2011	\$ 743,082	\$6,300,000	\$7,043,082

#### NOTE F - LONG-TERM OBLIGATIONS - Continued

On December 15, 2008, the Lincoln County, Kansas, Public Building Commission (PBC) issued Revenue Bonds, Series 2008 (the Bonds), in the amount of \$6,300,000, on behalf of the Hospital pursuant to a bond resolution dated December 1, 2008. The proceeds are to be used, together with other available funds of the Hospital, for the purpose of renovating the existing Hospital building (the Project).

The PBC is a municipal corporation created by the County to issue the Bonds. In connection with the issuance of the Bonds, the PBC, the County and the Hospital entered into a lease agreement in which the PBC leased the Project to the County and the Hospital for rental payments sufficient to provide for the payment of principal and interest on the Bonds. The lease contains a covenant by the County to make all rental payments required under the lease from whatever source of revenues is legally available and to levy ad valorem taxes without limit if necessary to make such payments.

In connection with the issuance of the Bonds, the Hospital and the County entered into a pledge of revenues agreement. Under the agreement, the Hospital pledged its net revenues to the County to secure the payment of principal and interest on the Bonds. The pledge of revenues agreement requires the Hospital to set aside certain amounts sufficient to pay principal and interest on the Bonds as payments are due. Such reserves were maintained and are included with assets limited as to use in the financial statements.

Scheduled annual debt service requirements on the lease with the Public Building Commission are as follows:

	<u>Principal</u>	<u>Interest</u>	<u>Total</u>	
2012	\$ 140,000	\$ 317,527	\$ 457,527	
2013	150,000	310,528	460,528	
2014	155,000	303,028	458,028	
2015	165,000	295,278	460,278	
2016	175,000	287,027	462,027	
Thereafter	5,515,000	3,276,177	8,791,177	
	\$ 6,300,000	\$ 4,789,565	\$11,089,565	

The following is a schedule of future minimum lease payments under capital leases, excluding the lease with the Public Building Commission, as of March 31, 2011:

	Principal	<u>Interest</u>	<u>Total</u>	
2012	\$ 119,065	\$ 35,771	\$ 154,836	
2013	125,327	29,509	154,836	
2014	131,919	22,917	154,836	
2015	120,087	16,265	136,352	
2016	120,112	10,088	130,200	
Thereafter	126,572	3,628	130,200	
	\$ 743,082	\$ 118,178	\$ 861,260	

### NOTES TO FINANCIAL STATEMENTS - CONTINUED March 31, 2011 and 2010

#### NOTE F - LONG-TERM OBLIGATIONS - Continued

Total interest costs are summarized as follows:

		<u>2011</u>		2010
Interest incurred Amortization of deferred financing	\$	323,345	\$	319,500
costs net of bond premium amortization	-	10,010	No.	12,152
Less		333,355		331,652
Net capitalized interest costs		127,124	-	329,680
Interest expense	\$	206,231	\$	1,972

#### NOTE G - PENSION PLAN

Substantially all employees of the Hospital participate in the Lincoln County Hospital Employees' Pension Plan (the Plan), which is a defined contribution plan. The payroll for employees covered by the Plan for the years ended March 31, 2011 and 2010, was \$1,817,365 and \$1,907,125, respectively. Substantially all employees of the Hospital who are 21 years of age or older are eligible to participate in the Plan after one year of employment. Covered employees are required under the terms of the Plan to contribute 2.5 percent of the first \$7,800 of covered compensation plus 5 percent of the covered compensation exceeding \$7,800. Under the terms of the Plan, the Hospital contributes 4.5 percent of the first \$7,800 of covered compensation, plus 9 percent of the covered compensation exceeding \$7,800. Contributions to the Plan made by employees vest immediately, and contributions to the Plan made by the Hospital vest based upon the Plan's vesting schedule and the employees' years of service with the Hospital. The total cost of the Plan for the years ended March 31, 2011 and 2010, was \$134,255 and \$133,766, respectively.

#### NOTE H - CONCENTRATION OF CREDIT RISK

The Hospital grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of patient accounts receivable from patients and third-party payors is as follows:

	2011	2010
Medicare Medicaid Blue Cross Commercial insurance Self-pay	56.2% 1.9 11.8 16.6 13.5	59.0% 4.3 7.4 7.2 22.2
	<u>100.0</u> %	<u>100.0</u> %

#### NOTE I - RISK MANAGEMENT

For the years ended March 31, 2011 and 2010, the Hospital was insured for hospital professional liability under a comprehensive hospital liability policy provided by an independent insurance carrier with limits of \$200,000 per occurrence up to an annual aggregate of \$600,000 for all claims made during the policy year. The Hospital is further covered by the Kansas Health Care Stabilization Fund for claims in excess of its comprehensive hospital liability policy up to \$800,000 pursuant to any one judgment or settlement against the Hospital for any one party, subject to an aggregate limitation for all judgments or settlements arising from all claims made in the policy year in the amount of \$2,400,000. All coverage is on a claims-made basis. The above policies were renewed on January 1, 2011, for the policy period from January 1, 2011 to January 1, 2012.

In addition to the risk disclosed elsewhere in these financial statements and notes thereto, the Hospital is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors or omissions; injuries to employees; and natural disasters. The Hospital purchases commercial insurance for these risks. Settled claims have not exceeded this commercial coverage in any of the past three years.

#### NOTE J - COMMITMENTS AND CONTINGENCIES

The Hospital purchases professional and general liability insurance to cover medical malpractice and other liability claims (see Note I). There are no known claims and incidents that have been asserted; therefore, no accrual for loss contingencies has been made.

During 2010, the Hospital entered into construction contracts to complete renovations to the Hospital. At March 31, 2011, the remaining cost of the construction project to be completed under the contracts is approximately \$264,000, of which the full amount has been accrued as a liability.

#### NOTE K - RELATED ORGANIZATIONS

Lincoln County levies and collects property taxes for the benefit of the Hospital. The Hospital received \$369,685 and \$363,293 in tax appropriations from Lincoln County in 2011 and 2010, respectively. The Hospital also received \$46,175 and \$8,800 in contributions from the Foundation in 2011 and 2010, respectively.

#### NOTE L - SUBSEQUENT EVENTS

Management has evaluated all subsequent events through the date of the independent accountants' report, the date the financial statements were available to be issued.

SUPPLEMENTAL INFORMATION



Certified Public Accountants and Management Consultants

Brian J. Florea, CPA Derek H. Hart, CPA John R. Helms, CPA Darrell D. Loyd, CPA Eric L. Otting, CPA

Jere Noe, CPA John E. Wendling, CPA Gary D. Knoll, CPA Adam C. Crouch, CPA Heather R. Eichem, CPA

### REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS ON SUPPLEMENTAL INFORMATION

Board of Trustees Lincoln County Hospital

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole of Lincoln County Hospital as of and for the years ended March 31, 2011 and 2010, which are presented in a preceding section of this report. The supplemental information presented hereinafter is presented for purposes of additional analysis and is not a required part of the basic financial statements.

The supplemental information presented on pages 22 and 23 has been subjected to the audit procedures applied in the audits of the basic financial statements. In our opinion, the supplemental information is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Wordling Noe Nelson & John 22C Topeka, Kansas July 29, 2011

# LINCOLN COUNTY HOSPITAL PATIENT SERVICE REVENUE Year ended March 31,

	2011			2010
	<u>Inpatient</u>	<u>Outpatient</u>	<u>Total</u>	Total
Daubina mandana				
Routine services	č1 210 707	<b>A</b>		4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Adults and pediatrics	\$1,310,797	\$ -	\$1,310,797	\$1,116,936
Ancillary services				
Operating room				1,794
Radiology, ultrasound,				,
nuclear medicine,				
echocardiography and				
vascular studies	82,753	300,440	383,193	467,224
CT scan and MRI	69,692	411,625	481,317	539,266
Laboratory and blood	190,865	773,805	964,670	983,709
Physical therapy	111,379	315,006	426,385	344,633
Occupational therapy	105,670	29,688	135,358	147,238
Speech therapy	8,507		8,507	5,339
Electrocardiology	15,569	47,481	63,050	81,038
Medical supplies	278,018	64,162	342,180	428,449
Pharmacy	882,101	359,035	1,241,136	1,272,660
Emergency room	13,012	205,818	218,830	198,066
Observation care		5,192	5,192	8,957
Clinic		724,204	724,204	746,848
	1,757,566	3,236,456	4,994,022	5,225,221
	•			
	\$3,068,363	\$3,236,456	6,304,819	6,342,157
Less				
Contractual adjustments -				
third-party payors			940,571	1,378,777
Charity care			14,021	23,198
Administrative discounts			11,219	10,632
Provision for bad debts			190,933	234,908
Net patient service revenue			\$ 5,148,075	\$4,694,642

## LINCOLN COUNTY HOSPITAL OPERATING EXPENSES BY FUNCTIONAL DIVISION Year ended March 31,

		2011			2010			
		Supplies			Supplies			
		and other,						
				and other,				
		employee		employee				
		benefits, and			benefits, and			
	<u>Salaries</u>	depreciation	<u>Total</u>	<u>Salaries</u>	depreciation	<u>Total</u>		
Routine services								
Adults and pediatrics	\$ 683,729	\$ 319,953	\$ 1,003,682	\$ 724,877	\$ 254,872	\$ 979,749		
Ancillary services								
Operating room		35	35					
Radiology, ultrasound,								
nuclear medicine,								
echocardiography and								
vascular studies	141,367	122,475	263,842	135,751	105,238	240,989		
CT scan and MRI	10,904	111,530	122,434	14,254	127,170	141,424		
Laboratory and blood	99,136	181,384	280,520	96,193	177,100	273,293		
Physical therapy		122,851	122,851	2,608	112,318	114,926		
Occupational therapy		64,728	64,728		65,376	65,376		
Speech therapy		5,753	5,753		2,976	2,976		
Electrocardiology	3,280		3,280	3,902		3,902		
Medical supplies	21,542	69,567	91,109	22,262	70,022	92,284		
Pharmacy		355,916	355,916		264,514	264,514		
Emergency room	143,577	206,237	349,814	86,963	331,603	418,566		
Clinic	717,725	283,571	1,001,296	540,983	252,179	793,162		
Ambulance					1,356	1,356		
	1,137,531	1,524,047	2,661,578	902,916	1,509,852	2,412,768		
General services								
Administration and								
general	98,937	256,081	355,018	96,998	183,325	280,323		
Accounting	185,800	155,708	341,508	182,807	137,027	319,834		
Plant operations and						•		
maintenance	51,615	216,024	267,639	52,584	172,246	224,830		
Laundry	28,680	33,734	62,414	25,597	21,302	46,899		
Housekeeping	80,657	53,349	134,006	60,002	37,291	97,293		
Dietary	185,557	155,061	340,618	179,782	137,836	317,618		
Nursing administration	96,690	29,519	126,209	139,983	36,569	176,552		
Medical records Education and	81,789	33,787	115,576	89,759	40,255	130,014		
activities	58,878	9,448	68,326		553	553		
Patient care	E0 0E0	00.600						
coordination	72,072	20,602	92,674	70,155	19,791	89,946		
Employee benefits -								
other		46,514	46,514		41,179	41,179		
Depreciation - building		245,266	245,266		18,350	18,350		
	940,675	1,255,093	2,195,768	897,667	845,724	1,743,391		
	\$ 2,761,935	\$ 3,099,093	\$ 5,861,028	\$ 2,525,460	\$ 2,610,448	\$ 5,135,908		